

**OFFICE OF MINORITY HEALTH
FY 2007 BILINGUAL/BICULTURAL DEMONSTRATION GRANT PROGRAM
PROJECT PROFILE**

1. **APPLICANT ORGANIZATION:**
2. **PROJECT DIRECTOR:**
3. **ADDRESS:**
4. **PHONE:** _____ **FAX:** _____
5. **E-Mail/Internet:**
6. **PROJECT TITLE:**

7. **Evidence of organizational linkage between the minority-serving community-based organization and the health care facility (page number):** _____

8. **Health Area(s) addressed in project. (Identify at least 1, but not more than 3 areas):**

_____ Adult Immunization	_____ Asthma	_____ Cancer	_____ Diabetes
_____ Heart Disease & Stroke	_____ Hepatitis B	_____ HIV	_____ Infant Mortality
_____ Mental Health	_____ Obesity & Overweight		

9. **Language and/or Dialect being addressed (specify):** _____

10. **Applicant Project Results:** (Identify 3 of the 5 for your project)

_____ Increasing awareness of health disparities	_____ Improving cultural and linguistic competency
_____ Strengthening leadership at all levels for addressing health disparities	_____ Improving coordination and utilization of research and outcome evaluations
_____ Improving patient-provider interaction	

Check all that apply for the proposed project. Projected numbers are to be inserted in the corresponding columns provided.	Projected Number of LEP individuals to receive services, by year.			Projected Number of Service Providers to be trained, if applicable, by year.		
	YR 01	YR 02	YR 03	YR 01	YR 02	YR 03
<u>Racial/Ethnic Groups</u> _____ American Indian/Alaska Native _____ Asian _____ Black/African American _____ Hispanic/Latino _____ Native Hawaiian or Other Pacific Islander _____ Other (specify): _____ Identify Subpopulation(s) (e.g., Samoan): _____						
<u>Gender</u> <div style="text-align: right;"> _____ Male _____ Female </div>						
<u>Age Group</u> (Complete age range) <div style="text-align: right;"><u>Age Range</u></div> _____ Prenatal _____ Infants (____ to ____) _____ Children (____ to ____) _____ Adolescents (____ to ____) _____ Adults (____ to ____) _____ Elderly (____ to ____) 						